

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09903412	FILING DATE 7/11/01		
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
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TOTAL IND.	9		9							
TOTAL DEP.	43		39							
TOTAL CLAIMS	52		48							
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS										

FORM PTO-1360 (REV. 3-78)

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